

Departmen		enue																									U	70	,
										Υ	our/	Soc	ial Se	curi	ty N	uml	oer )	<b>-</b>	F	T	Ī			T	T	T	T	Ī	Ī
	Name-	-Last,	First, I	/liddle	e Initi	ial													ľ						_				_
>		Т	Т										П				П	Т	Г	П		Т	П						
L A	Mailing	ng Address (Number and Street or P.O. Box)  Apartment Number																											
B E																			Т										
L	City, To	vn or	n or Post Office State ZIP Code																										
>																						Τ							
		Т	2011																						1		2		3
FAMILY SIZE	1	POLITICAL PARTY  Box 1 for Democratic, Box 2 for Republican, or Box 3 for No Design											in																
		$\perp$	FUN	D			X 1 10	or <b>D</b> e	emoc	cratic	<b>c,</b> Bo	x 2	ior <b>K</b> e	epub	ııcan	, or	вох	3 101	IVO	Desig	gna	tior	1.				_		_
INCOME	This is your Kentucky Modified Gross Income (If \$13.832 or less.										Cent	ts																	
			may c			•											age	2.)	1	•	_		,					_	0
	2.	Stan	dard d	educ	tion .														2		4	2	,	1	0	0		_	0
	3.	Subt	ract lir	ne 2 f	rom	line '	1. This	is y	our Ta	axab	le Inc	ome	e						3		4		,					_	0
TAX	4.	Ente	r tax f	rom	TaxT	able	or Ta	х Со	mpı	utatio	on fo	r an	noun	on I	ine 3	3			4		L		,					_	0
	5.	Pers	onal t	ax cr	edit.														5						2	0		_	0
	6. 7	Subt	ract li	ne 5	fron	n line	4. If	line	5 is	larg	er th	an li	ine 4,	ente	r zer	o			6		-	_	,					_	0
	/.	decir	nal an	nount	y tile		(		%) a	and e	enter	here	e (see	instr	uctio	ns o	n pa	ge 2)	7	•	-	_	,					_	0
	8.	Subt	ract li	ne 7	fron	n line	6.TI	his is	you	ır <b>In</b> o	come	Tax	( Liab	ility					8		ŀ	_	,						0
	9.	Ente	r <b>Ken</b> t	tucky	/ Use	Tax													9	•	ŀ	_	,					_	0
			lines r <b>Ken</b> t																10	•	ŀ	-	,					_	0
		2008	Form	1 W-2	, Wa	ge a	nd Ta	x Sta	atem	ent(	s)								11	•	ŀ	-	,					_	0
	12.		e 11 is	Ū						MOU	INT C	VEI	RPAID	(see	instr	ucti	ons)		12		L		,					0	0
	10		l Cont		,			ıctio	ns.							>	(Ente	er am	oun	t(s) cl	heck	ed)							
	13.		<b>ature</b> ] \$10		\$	25		\$50		C	Other					•	L		Ш	. (	0	0							
			<b>hild Vi</b> <b>1</b> \$10		\$	25		\$50		C	Other					•	L			. (	0	0							
			eteran \$10		\$	25		\$50			Other					•	L		Ш	. (	0	0							
		d B	reast (			<b>sear</b> 25		l <mark>ucat</mark> \$50	ion T		Other					•				_ (	0	0							
	1/1	٨٨٨	amou	inte c	ontr	ibut	ad on	line	se 12	a 13	Rh 11	Sc a	nd 13	Ч					1/1		Т							0	0
	14.	Auu	annoc	11113	JOIILI	ibuti	su oi	1 11110	3 13	a, ic	,, ,,	oc a	iiu is	u					_		ř	=	,						_
			ract li													_	REF	JND	15	•	L	_	,					U	0
	16.	paya	e 10 is ble to rity nu	Kent	ucky	Stat	e Trea	sure	r. Wr	ite y	our S	ocia	al					)WE	]16	•			,				.[	0	0
	ndersigne and to the									rrect				rn, in	cludir	ng ar	ny acc	ompa	ınyinç	g state	<del>-</del> e-								
Your Sig	gnature									<b>*</b>	Telep	hon	e Num	ber (d	laytin	ne)		Da	te Sig	ıned	_								
Typed o	r Printed	Name	of Prep	arer C	Other of	Than	Taxpa	yer			I.D. N	luml	ber of	Prepai	rer				Da	te	_								

Attach Form W-2, Wage and Tax Statement(s) and Payment Here

Mail to:

**REFUNDS PAYMENTS** 

Kentucky Department of Revenue, Frankfort, KY 40618-0006.

Kentucky Department of Revenue, Frankfort, KY 40619-0008.

OFFICIAL USE ONLY **PWR**  Who May Use Form 740-EZ—You may use Form 740-EZ if all five of the following apply:

- ✓ you were a Kentucky resident for the entire year;
- √ you are filing federal Form 1040EZ;
- ✓ your filing status is single;
- you do not claim additional credits for being age 65 or over, blind, or a member of the Kentucky National Guard at the end of 2008; and
- you had only wages, salaries, tips, unemployment compensation, taxable scholarship or fellowship grants, and your taxable interest was \$1,500 or less.

If you do not meet all five of the above requirements, see Form 740 instructions.

When to File—The 2008 Form 740-EZ must be postmarked no later than April 15, 2009, to avoid penalties and interest.

COMPLETING FORM 740-EZ—For more information, see the General Instructions. You may also contact the Department of Revenue in Frankfort at (502) 564-4581 or a Kentucky Taxpayer Service Center.

Please print your numbers inside the boxes with black ink. Do not use dollar signs.

**Enter your Social Security number on your return.** To protect your privacy, your Social Security number is not printed on the peel-off label that came in the mail.

**Political Party Fund Designation**—You may designate \$2 of your taxes to either the Democratic or Republican party if you have a tax liability of at least \$2.

## **LINE-BY-LINE INSTRUCTIONS**

Line 1—Enter federal adjusted gross income from Form 1040EZ, Line 4. (Do not confuse federal adjusted gross income with federal taxable income shown on the federal return.) If \$13,832 or less, see instructions for Line 7 and enter the decimal amount on Line 7.

If you are not required to file a federal income tax return, enter the total income from sources within and without Kentucky.

**Line 2**—The standard deduction of \$2,100 has been preprinted. If your itemized deductions exceed \$2,100, it will benefit you to file Form 740 and itemize your deductions on Schedule A.

**Line 4**—Compute your tax using the following tax rate schedule.

lf	taxab	le i	inco	ome is: Ta	ax before credit is:
	\$	0	_	\$3,000	2% of taxable income
	\$3,0	01	_	\$4,000	3% of taxable income minus \$30
	\$4,0	01	_	\$5,000	4% of taxable income minus \$70
	\$5,0	01	_	\$8,000	5% of taxable income minus \$120
	\$8,0	01	_ \$	\$75,000	5.8% of taxable income minus \$184
	\$75,	00′	1 an	d up	6% of taxable income minus \$334
	Exa	am	ple:	(Taxable income)	\$8,500 x 5.8% - \$184 = \$309

Note: An optional tax table is available online at www.revenue.ky.gov

or by calling the Department of Revenue, (502) 564-4581.

Line 7, Family Size Tax Credit—For single persons eligible to file Form 740-EZ, Kentucky family size is one and Kentucky modified gross income is equal to federal adjusted gross income. A family size tax credit is allowed for single persons whose **Kentucky modified gross income** is not over \$13,832. If over \$13,832, you do not qualify for this tax credit. Skip Line 7.

Enter in the space provided the decimal amount from the following table.

Family S One		Percent of Tax as Family Size Tax Credit							
If the Kentucky gross income		Enter decimal amount on Line 7							
over	but not over								
\$ 0 \$10,400 \$10,816 \$11,232 \$11,648 \$12,064 \$12,480 \$12,896 \$13,208 \$13,520	\$10,816 \$11,232 \$11,648 \$12,064 \$12,480 \$12,896 \$13,208 \$13,520	1.00 0.90 0.80 0.70 0.60 0.50 0.40 0.30 0.20	(100%) (90%) (80%) (70%) (60%) (50%) (40%) (30%) (20%) (10%)						

Multiply amount on Line 6 by decimal amount. Enter result on Line 7. This is your Family Size Tax Credit.

**Line 9, Kentucky UseTax**—Enter 6 percent of out-of-state purchases for use in Kentucky on which sales tax was not charged. Include Internet and catalog purchases, subscriptions, furniture, carpet, boats, etc.

Line 11, Kentucky Tax Withheld—Enter the amount of Kentucky income tax withheld as shown on your 2008 wage and tax statements. These statements must be attached to your return. Make sure you file the copy designated to be filed with your state return. Do not include amounts withheld by your employer for other states. Amounts withheld in other states cannot be credited to your Kentucky income tax. Local government occupational, license or income taxes must not be included on Line 11.

Line 12—If the amount on Line 11 (Kentucky Tax Withheld) is more than the amount on Line 10 (TotalTax Liability), you have an overpayment and are due a refund. Subtract Line 10 from Line 11, and enter the difference on Line 12 as an overpayment. However, if your Total Tax Liability on Line 10 is larger than Line 11, you owe additional tax. Subtract Line 11 from Line 10 and enter on Line 16.

Line 13—If you show an overpayment on Line 12, you may contribute to: (a) the Nature and Wildlife Fund, (b) the Child Victims' Trust Fund, (c) the Veterans' Program Trust Fund and/or (d) the Breast Cancer Research and Education Trust Fund. Donations are voluntary and amounts donated will be deducted from your refund.

Enter the amount(s) you wish to contribute on Lines 13(a), 13(b), 13(c) and/or 13(d). The total of these amounts cannot exceed the amount of the overpayment.

Line 16—You must pay any tax due shown on Line 16. Make check payable to **Kentucky State Treasurer**, and attach it to your return. On the face of the check please write "KY Income Tax—2008" and your Social Security number.

Underpayment of Estimated Tax—If the amount owed is more than 30 percent of the income tax liability on Line 8, you may be subject to a penalty of 10 percent of the underpayment of estimated tax. The minimum penalty is \$25. The amount of the penalty may be calculated on Form 2210-K, which may be obtained from the Department of Revenue.

Interest and Penalties—File your return and pay any additional tax due by April 15, 2009 to avoid interest and penalties. See the General Instructions or contact the Department of Revenue for additional information.

**Note:** Penalties but not interest may be reduced or waived if reasonable cause can be shown.

Signature—Each return must be properly signed by the taxpayer.